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PTO/SB/01 (10-00)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	7040-363
	First Named Inventor	Jean A. CHMIELEWSKI
	COMPLETE IF KNOWN	
	Application Number	10 / 018,043
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PHARMACEUTICAL MATERIALS AND METHODS
FOR THEIR PREPARATION AND USE

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number PCT/US00/16140 and was amended on (MM/DD/YYYY) herewith

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
PCT/US00/16140	PCT	06/12/2000	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NO <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/138,912		

[Page 1 of 4]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label <input style="width: 100px; height: 20px;" type="text"/>		OR <input checked="" type="checkbox"/> Correspondence address below	
Name Thomas Q. Henry @ Woodard, Emhardt, Naughton, Moriarty & McNett			
Address Bank One Center/Tower, Suite 3700			
Address 111 Monument Circle			
City Indianapolis	State IN	ZIP 46204-5137	
Country US	Telephone 317-634-3456	Fax 317-637-7561	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jean A.		Family Name or Surname CHMIELEWSKI	
Inventor's Signature		Date	
Residence: City Lafayette	State IN	Country US	Citizenship US
Mailing Address 511 South 9th Street			
Mailing Address			
City Lafayette	State IN	ZIP 47901	Country US
NAME OF SECOND INVENTOR:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Bart E.		Family Name or Surname KAHR	
Inventor's Signature <i>Bart Kahr</i>		Date 11/7/02	
Residence: City Seattle	State WA	Country US	Citizenship US
Mailing Address 4612 47th Avenue South			
Mailing Address			
City Seattle	State WA	ZIP 98118	Country US
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

10018043-052102

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PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jerry		LEWIS	
Inventor's Signature		Date	
Residence: City Carmel	State IN	Country US	Citizenship US
Mailing Address 14104 Old Mill Circle			
Mailing Address			
City Carmel	State IN	ZIP 46032	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
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PTO/SB/02C (3-97)

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DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
Harold R. Woodard	#16,214		
C. David Emhardt	#18,483		
Joseph A. Naughton, Jr.	#19,814		
John V. Moriarty	#26,207		
John C. McNett	#25,533		
Thomas Q. Henry	#28,309		
James M. Durlacher	#28,840		
Charles R. Reeves	#28,750		
Vincent O. Wagner	#29,596		
Steve Zlatos	#30,123		
Spiro Bereveskos	#30,821		
Clifford W. Browning	#32,201		
R. Randall Frisk	#32,221		
Daniel J. Lueders	#32,581		
Kenneth A. Gandy	#33,386		
Timothy N. Thomas	#35,714		
Kurt N. Jones	#37,996		
John H. Allie	#39,088		
Holiday W. Banta	#40,311		
Troy J. Cole	#35,102		
L. Scott Paynter	#39,797		
Charles J. Meyer	#41,996		
Matthew R. Schantz	#40,800		
Gregory B. Coy	#40,967		
Lisa A. Hiday	#40,036		
John V. Daniluck	#40,581		
Christopher A. Brown	#41,642		
C. John Brannon	#44,557		
Arthur J. Usher, IV	#41,359		
Douglas A. Collier	#43,556		
Brad A. Schepers	#45,431		
James B. Myers	#42,021		
Scott J. Stevens	#29,446		
John M. Bradshaw	#46,573		
Charles P. Schmal	#45,082		
Edward E. Sowers	#36,015		
Quentin G. Cantrell	#47,469		

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	Application Number	10 / 018,043
	Filing Date	
	Group Art Unit	
	Examiner Name	

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☐ is attached hereto

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Application Number

PCT/US00/16140

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/US00/16140	PCT	06/12/2000	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address below

Name Thomas Q. Henry @ Woodard, Emhardt, Naughton, Moriarty & McNett

Address Bank One Center/Tower, Suite 3700

Address 111 Monument Circle

City Indianapolis

State IN

ZIP 46204-5137

Country US

Telephone 317-634-3456

Fax 317-637-7561

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Jean A.

Family Name
or Surname

CHMIELEWSKI

Inventor's
Signature

January 7, 2002
Date

Residence: City Lafayette

State IN

Country US

Citizenship US

Mailing Address 511 South 9th Street

Mailing Address

City Lafayette

State IN

ZIP 47901

Country US

NAME OF SECOND INVENTOR:

☒ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Bart E.

Family Name
or Surname

KAHR

Inventor's
Signature

Date

Residence: City Seattle

State WA

Country US

Citizenship US

Mailing Address 4612 47th Avenue South

Mailing Address

City Seattle

State WA

ZIP 98118

Country US

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Page 2 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
<u>Jerry</u>		<u>LEWIS</u>	
Inventor's Signature		Date	
Residence: City <u>Carmel</u>	State <u>IN</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>14104 Old Mill Circle</u>			
Mailing Address			
City <u>Carmel</u>	State <u>IN</u>	ZIP <u>46032</u>	Country <u>US</u>
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Address 111 Monument Circle

City Indianapolis State IN ZIP 46204-5137

Country US Telephone 317-634-3456 Fax 317-637-7561

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Given Name
(first and middle [if any]) Jean A.

Family Name
or Surname CHMIELEWSKI

Inventor's
Signature

Date

Residence: City Lafayette State IN Country US Citizenship US

Mailing Address 511 South 9th Street

Mailing Address

City Lafayette State IN ZIP 47901 Country US

NAME OF SECOND INVENTOR: ☒ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Bart E.

Family Name
or Surname KAHR

Inventor's
Signature

Date

Residence: City Seattle State WA Country US Citizenship US

Mailing Address 4612 47th Avenue South

Mailing Address

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Given Name (first and middle [if any])		Family Name or Surname	
Jerry		LEWIS	
Inventor's Signature <i>Jerry Lewis</i>		Date 01-10-02	
Residence: City Carmel	State IN	Country US	Citizenship US
Mailing Address 14104 Old Mill Circle			
Mailing Address			
City Carmel	State IN	ZIP 46032	Country US
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